Г]Fail	led \Box	Closed IHH	State of Maine I	<u></u>	1+1	h Ir		ooctic	n Report	<u> </u>			202 1	of 5		
Failed Closed IHH			<u> </u>			Health Inspection Report No. of Risk Factor/Intervention Groups Out No. of Repeat Risk Factor/Intervention Groups Out						3	Date	Page 1 of 5 Date 1/26 Time In 10:1		201	<u>5</u>
		-A-DEE	ille	As Authorized by 22 MRSA § 2496					ection Man	<u> </u>	Out	Y	Time	-	12:00		
License Expiry Date/EST. ID#				Address		Tc	City Zip Cod		Zip Code		Tele	phone			=		
1				1472 LISBON ST	LEWISTON			04240-35	16		-376-38	370					
License Type Owne				Owner Name	Purpose of Inspection			License Pos	ted	R	Risk Cate	gory		_			
MUN - EATING AND CATERING CHICK-A-DEE (CHICK-A-DEE OF LEWIST	TON IN Regular			Yes									
						CTORS AND PUBLIC HEALTH INTERVENTIONS											
	Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable Mark"X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation																
Compliance Status Cos R Compliance Status											C	cos	R				
Supervision						Potentially Hazardous Food Time/Temperature											
1	PIC present, demonstrates knowledge, and performs duties					16 17		IN	Proper cooking				•		_	-	
				oyee Health	17 IN Proper reheating procedures for hot holding 18 IN Proper cooling time & temperatures					-	_						
2		IN	Management awarenes	s; policy present	19 IN Proper tooling time & temperatures 19 IN Proper hot holding temperatures					\rightarrow	\dashv	Н					
3		IN		, restriction & exclusion			20		IN						\dashv	\dashv	Г
		OUT		jienic Practices	Ιν	21 IN Broner data marking 8 dianositie						- 	\dashv	Г			
4 5		OUT IN	Proper eating, tasting, No discharge from eyes	drinking, or tobacco use s. nose, and mouth	 X	22 IN Time as a public health control: pr					ıres & re	cord	\dashv	Г			
				mination by Hands		Ė				<u> </u>	mer Advisory	<u>·</u> _					
6		IN	Hands clean & properly washed			Т	1			Consumer advisory provided for raw or					\neg	П	Т
7			No bare hand contact v	vith RTE foods or approved			23		IN	undercooked f	oods						
		IN	alternate method prope	erly followed						Highly Susce	ptible Popula	tions					
8		IN	Adequate handwashing	g facilities supplied & accessible			24		IN	Pasteurized foods used; prohibited			d food	s not			
			Approv	ed Source]			offered							
9		IN	Food obtained from app	proved source			05				Chemical						
10		IN	Food received at prope	r temperature			25 26		IN		es: approved & properly used				_	\vdash	
11		IN	Food in good condition	, safe, & unadulterated] 🖆		IN		stances properly identified, stored & used with Approved Procedures						
12		IN	Required records avail	able: shellstock tags													
'-		11.4	parasite destruction				27		IN	Compliance wi	th variance, s	special	lized p	rocess,			
			Protection fr	om Contamination		_	ĮШ			& HACCP plan							_
13		OUT	Food separated & prote			_	↓ ſ	Risl	k Factors	are improper pra	ctices or proce	dures ic	dentifie	d as the n	nost		
14		OUT		of seturned provincely corridd													
15										<u>_</u>							
				GOOD				-									
			Good Retail Practices are	preventative measures to control the	additi	on o	of patho	gens	s, chemical	s, and physical obje	ects into foods.						
Ма	rk "X'	" in box if n	umbered item is not in com	pliance Mark "X" in appropriat	e box f	for C	OS ar	ıd/or	R CO	S=corrected on-site	e during inspec	ction	R=re	peat viola	ation		
					cos	R									· ·	cos	R
			Safe Food and	Water						Proper Us	se of Utensils						
28 IN Pasteurized eggs used where required					Т	Т	41	IN	In-use ute	ensils: properly sto	ored					П	Т
29 IN Water & ice from approved source				\neg	T	42	-		equipment, & line		stored,	dried	, & hand	lled	一	_	
30 IN Variance obtained for specialized processing methods			processing methods		1	43	-		e & single-service							_	
			Food Temperature (Control			44	IN	Gloves us	ed properly							
31	IN I	Proper co	oling methods used; ade	quate equipment for		Γ				Utensils, Equip	ment and Ver	nding					
Ш			re control		\perp	\perp	45	x		on-food contact su						T	Х
32	-+	Plant food	properly cooked for hot	holding	\perp	_	↓		properly	designed, constru	cted, & used						
33 IN Approved thawing methods used					_		-		hing facilities: ins		ined, 8	& usec	d; test st	rips		_	
34 X Thermometers provided and accurate 47 X Non-food contact surfaces clean																	
			Food Identificati			_	4 📙				al Facilities					_	
35	IN	Food prop	erly labeled; original con				4 H	IN		d water available;)			_	_
			Prevention of Food Cont			-				installed; proper						_	_
36 N Insects, rodents, & animals not present						\perp		-		k waste water pro	<u> </u>					_	_
37	-+			od preparation, storage & display	<u>′ </u>	+	- I	-		ilities: properly co		•				_	_
38	-+		leanliness		+	+		-		& refuse properly				ained		\dashv	_
39	_		ths: properly used & stor	red	+	+	53	-	_	facilities installed,						\dashv	Х
40	IN	Washing f	ruits & vegetables	Α			54	Х	Adequate	ventilation & ligh	tıng; designa	ted are	eas us	ed			
Person in Charge (Signature) Date: 1/26/2015 Follow-up: YES NO Date of Follow-up: 2/26/2015																	
Hea	Health Inspector (Signature) Follow-up: ▼YES NO Date of Follow-up: 2/26/2015									_							
																	_

Otate of Main	е пеанн шър	ection Rep	ort	Page 2 of 5							
	As Authoriz	As Authorized by 22 MRSA § 2496									
Address 1472 LISBON ST	City / Stat LEWISTOI	e N / ME	Zip Code 04240-3516	Telephone 207-376-3870							
Temperature Observations											
Temperature		Notes									
38											
39											
110 plus											
39											
38											
38											
	1472 LISBON ST Tempe	Address 1472 LISBON ST Temperature Observation Temperature 38 39 110 plus 39 39	Address 1472 LISBON ST Temperature Observations Temperature Notes 38 39 110 plus 39 38	Address 1472 LISBON ST Temperature Observations Temperature Notes 38 39 110 plus 39 38							

Person in Charge (Signature)

Health Inspector (Signature)



State of Maine Health Inspection Report

Establishment Name

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CHICK-A-DEE

License Expiry Date/EST. ID# Address City / State Zip Code 2/2/2015 / 155 1472 LISBON ST LEWISTON ME 04240-3516

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

4: 2-401.11: C: Food employee is eating, drinking, or using any tobacco where the contamination of exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES; or other items needing protection can result.

INSPECTOR NOTES: drinks must have covers and straw-corrected on site

13: 3-302.11.(A).(1).(A): N: Raw Ready-to-Eat food not protected from cross contamination from raw animal foods during storage, preparation, holding, or display.

INSPECTOR NOTES: schrimp stored above raw vegetables-corrected on site

14: 4-601.11.(A): C: Equipment food-contact surfaces and utensils are not clean to sight and touch.

INSPECTOR NOTES: potato peeler and knifes dirty-corrected on site- clean ice machine

34: 4-302.12.(A): N: Inadequate number of food temperature measuring devices provided.

INSPECTOR NOTES: thermometers needed all coolers

45: 4-204.12: N: Equipment openings, closures and deflectors are improperly designed and constructed.

INSPECTOR NOTES: repace any split seals on refrigeration equipment

45: 4-204.16: N: Beverage tubing and/or cold plate improperly installed in contact with stored ice.

INSPECTOR NOTES: cold plate and tubing in direct contact with ice

47: 4-601.11.(B): C: Food contact surfaces of cooking equipment not clean.

INSPECTOR NOTES: clean all cooking equipment

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: clean racks and outside of storage containers in walk-in cooler-refrigetation units

53: 6-201.11: N: Floors, walls, and ceilings are not smooth and easily cleanable.

INSPECTOR NOTES: paint walls basement area-installed flooring where missing or in disrepair

53: 6-201.13.(A): N: Floor and wall junctures are not enclosed and sealed.

INSPECTOR NOTES: repair and install cove base where needed

53: 6-501.12: N: The physical facilities are not clean.

INSPECTOR NOTES: clean floors and walls back of euipment

Person in Charge (Signature)

Date: 1/26/2015

Health Inspector (Signature)

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State of Maine Health Inspection Report

Establishment Name

CHICK-A-DEE

License Expiry Date/EST. ID# Address City / State Zip Code 2/2/2015 / 155 1472 LISBON ST LEWISTON ME 04240-3516

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

54: 6-202.11: N: Lights not shielded.

INSPECTOR NOTES: need shields on light over range basement area or install shatter proof bulbs

54: 6-501.14.(A): N: Ventilation not clean.

INSPECTOR NOTES: clean range hood systems

Person in Charge (Signature)

Health Inspector (Signature)



Date: 1/26/2015

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HHE-601(a)Rev.01/07/10 Page 4 of 5

State of Maine Health Inspection Report Page 5 of 5 1/26/2015 Date **Establishment Name CHICK-A-DEE** License Expiry Date/EST. ID# **Address** Zip Code City / State 2/2/2015 /155 1472 LISBON ST LEWISTON ME 04240-3516

Inspection Notes

Certified Food Protection Manager

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired within 90 days of a new eating establishment opening or when a CFPM leaves employment. For a list of CFPM courses and trainers go to http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to your inspector [Susan Reny] by emailing to

[sreny@lewistonmaine.gov] or faxing to 207-795-5071. A copy may also be sent to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333 or carol.gott@maine.gov.

Please include the name of your establishment and the establishment ID# with your certification(s).

2013 Maine Food Code Adoption

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy,

http://www.maine.gov/healthinspection. Following are a few of the major changes:

- " No Bare Hand Contact with Ready-To-Eat Food. Handlers are required to use gloves, utensils, deli papers, etc., to avoid bare hand contact with ready-to-eat food;
- " Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events;
- " Responsibilities of the person in charge for ill employees (exclusions and restrictions); and,
- Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact the inspector when the critical violation has been addressed at 207-(513-3125 Ext 3224) or email (sreny@lewistonmaine.gov). Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties, which are outlined in Sections 7, 8 and 9 of the Rules Relating to the Administration and Enforcement of Establishments Licensed by the Health Inspection Program available at http://www.maine.gov/healthinspection. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Don Hebert is a CFPM CERT# 9832104 Exp 3/6/2018

Information given to owner on No bare hand conact,date marking-employee health awareness---owner needs to have policy on bodily fluid clean-up

Person in Charge (Signature)

Date: 1/26/2015

Health Inspector (Signature)

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